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FEC FORM 3X

Only

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines FEDERATION OF AMERICAN HOSPITALS PAC 801 PENNSYLVANIA AVENUE ADDRESS (number and street) SUITE 245 Check if different than previously WASHINGTON DC 20004 2604 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** CITY A ZIPCODE A IS THIS **AMENDED** NEW C00002261 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 07 0 1 2007 07 3 1 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mr. Jeffrey Micklos Type or Print Name of Treasurer Electronically Filed by Mr. Jeffrey Micklos 08 15 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name FEDERATION OF AMERICAN HOSPITALS PAC D " D 0.7 0.7 0 1 2007 3 1 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand [°]2007 5152.38 January 1 (b) Cash on Hand at 29287.99 Begining of Reporting Period 40309.23 390525.57 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 69597.22 395677.95 6(a) and 6(c) for Column B) 4953.40 331034.13 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 64643.82 64643.82 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

FEDERATION OF AMERICAN HOSPITALS PAC

Report Covering the Period:

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other
Than Political Committees

1. Heceipts	Total This Period	Calendar Year-to-Date
11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees	33533.34	156131.70
(i) Itemized (use Schedule A)	1065.00	27101.68
(ii) Unitemized (iii) TOTAL (add	34598.34	183233.38
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	31000.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	34598.34	214233.38
Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 6. Refunds of Contributions Made	0.00	0.00
to Federal candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	5710.89	176292.19
8. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	40309.23	390525.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	40309.23	390525.57

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	168750.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	168750.00
2. Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees	1500.00	153500.00
and Other Political Committees Independent Expenditure	0.00	0.00
(use Schedule E)	0.00	0.00
	0.00	0.00
6. Loan Repayments Made		
7. Loans Made	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements	3453.40	8784.13
Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4953.40	331034.13
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	4953.40	331034.13

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	34598.34	214233.38
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34598.34	214233.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	168750.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	168750.00

PAGE 6/22 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 l 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN HOSPITALS PAC Full Name (Last, First, Middle Initial) Date of Receipt Noel Williams Mailing Address One Webster Lane 07 2007 02 City State Zip Code Transaction ID: 20593790 Nashville ΤN 37205 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 C federal political committee. Name of Employer HCA, Inc. Occupation SVP & CIO Receipt For: Aggregate Year-to-Date 🔻 Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Beverly Wallace Date of Receipt Mailing Address 206 Concord Park West 02 2007 City State Zip Code Transaction ID: 20593793 <u>Nashville</u> TN 37205 Amount of Each Receipt this Period FEC ID number of contributing C 3000.00 federal political committee. Name of Employer HCA, Inc. Occupation Group President Receipt For: Aggregate Year-to-Date V Primary General 3000.00 Other (specify) Full Name (Last, First, Middle Initial) C. Paul Martin Paslick Date of Receipt Mailing Address 368 Lake Valley Drive 2007 07 02 Zip Code Citv State Transaction ID: 20593794 Franklin TN 37069 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer HCA, Inc. Occupation Vice President, IT & Services Receipt For: Aggregate Year-to-Date ▼ General Primary 500.00 Other (specify) 6000.00 SUBTOTAL of Receipts This Page (optional)

PAGE 7/22 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN HOSPITALS PAC Full Name (Last, First, Middle Initial) Date of Receipt Margaret G Lewis Mailing Address 1830 Fountain Drive 07 2007 02 Apt. 1203 City State Zip Code Transaction ID: 20593795 VA 20190 Reston Amount of Each Receipt this Period FEC ID number of contributing 1500.00 C federal political committee. Name of Employer HCA, Inc. Occupation Healthcare Executive Aggregate Year-to-Date ▼ Receipt For: Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Rodney Vanpelt Date of Receipt Mailing Address 4547 San Lorenzo Blvd. 07 02 2007 City State Zip Code Transaction ID: 20593991 **Jacksonville** FL 32224 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Memorial Hospital Jackson-Occupation **CFO** <u>ville</u> Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. Mr. Jim Wood Date of Receipt Mailing Address 13722 Marsh Harbour Drive North 2007 07 02 Citv State Zip Code Transaction ID: 20594406 32225 Jacksonville FI Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer Memorial Hospital Jackson-Occupation CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)

PAGE 8/22 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN HOSPITALS PAC Full Name (Last, First, Middle Initial) Date of Receipt Edward T Jones Mailing Address 2239 Avery Valley Drive 07 2007 02 City State Zip Code Transaction ID: 20594866 Franklin ΤN 37067 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer HCA, Inc. Occupation VP of Supply Chain Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dwight E Long Date of Receipt Mailing Address 406 Belle Glen Lane 03 2007 City State Zip Code Transaction ID: 20607389 **Brentwood** TN 37027 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer HCA, Inc. Occupation VP-Accounting Receipt For: Aggregate Year-to-Date V Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. Andrea L. Wozniak Date of Receipt Mailing Address 3181 Sand Marsh Lane 2007 07 03 Citv State Zip Code Transaction ID: 20607390 Mount Pleasant SC 29466 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer East Cooper Regional Medi-Occupation Chief Executive Officer cal Center Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 / 22
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN HOSE	PITALS PAC		
Full Name (Last, First, Middle Initial) Ms. Rebecca Cheng Mailing Address 8444 Sunset Rose Dr	ive		Date of Receipt M M D D Y Y Y Y Y Y Y Y
City Corona	State CA	Zip Code 92883	Transaction ID: 20607392 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	32000	400.00
Name of Employer Corona Regional Medical Center Receipt For: Primary General	Occupatio CFO Aggregate	n e Year-to-Date ▼ 400.00	1
Under (specify) ▼ Full Name (Last, First, Middle Initial) 3. Robert Halinski	0 0		Date of Receipt
Mailing Address 101 Hedgerow Way			07 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20607394
<u>Lansdale</u>	PA	19446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Universal Health Services, Inc	Occupatio Director	n of Reimbursement	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Jane D Englebright	•		Date of Receipt
Mailing Address 241 Gillette Drive			07 03 7 2007
City	State	Zip Code	Transaction ID: 20607395
Franklin	TN	37069-4115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer HCA, Inc.		Management	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional) .			1400.00
TOTAL This Period (last page this line numbe	r only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 22
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
		, ,	13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN HOSPIT	ALS PAC		
Full Name (Last, First, Middle Initial) A. Sam Hankins, Jr.			Date of Receipt
Mailing Address 203 Sheffield Place			07 03 7 2007
City Nashville	State TN	Zip Code 37215	Transaction ID: 20607396
FEC ID number of contributing federal political committee.	C	37213	Amount of Each Receipt this Period 2500.00
Name of Employer HCA, Inc.	Occupation		
	Group C	FO e Year-to-Date ▼	4
Receipt For: Primary General Other (specify) ▼	Aggregate	2500.00	
Full Name (Last, First, Middle Initial) 3. Alan B Miller			Date of Receipt
Mailing Address 57 Crosby Brown Road			07 06 7 2007
City	State	Zip Code	Transaction ID: 20684326
Gladwyne	PA	19035	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		5000.00
Name of Employer Universal Health Services,	Occupation		
Inc Receipt For:		n & President e Year-to-Date ▼	-
Primary General	199.194		1
Other (specify) ▼	0 0	5000.00	
Full Name (Last, First, Middle Initial) David G Anderson			Date of Receipt
Mailing Address 1057 Vaughn Crest Driv	е		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20685978
Franklin	TN	37069	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		2500.00
Name of Employer HCA, Inc.	Occupation SVP Final	n ance & Treasurer	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	2500.00	
SUBTOTAL of Receipts This Page (optional)			10000.00
TOTAL This Period (last page this line number or	nly)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 22
	EMIZED RECEIPTS		or each category of the	(check only one)
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	or information and formation by December and O			13 14 15 16 17
or	ly information copied from such Reports and St for commercial purposes, other than using the	name and add	dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	FEDERATION OF AMERICAN HOSPI	TALS PAC		
A.				Date of Receipt
	Mailing Address 9322 Navaho Drive			07 06 2007
	City	State	Zip Code	Transaction ID: 20687131
	Brentwood	TN	37027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer HCA, Inc.	Occupation Vice Pres		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	7
	Other (specify) ▼	0 0	500.00	
В.	Full Name (Last, First, Middle Initial) Vanas C George			Date of Receipt
	Mailing Address 5189 Colleton Way			07 06 7 2007
	City	State	Zip Code	Transaction ID: 20687136
	Brentwood	TN	37027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer HCA, Inc.	Occupation Healthca	n re Executive	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		2500.00	7
	Other (specify) ▼	0 0	2500.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) Michael A Reese			Date of Receipt
	Mailing Address 4600 Taft			07 06 7 2007
	City	State	Zip Code	Transaction ID: 20687138
	Metairie	LA	70002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer HCA, Inc.	Occupation Oivision (
			e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	1
		0 0	0 0 0 0 0 0 0 0	<u> </u>
s	UBTOTAL of Receipts This Page (optional)			3500.00
Т	OTAL This Period (last page this line number of	only)	1	

CCHEDIII E A /EEC Earm 2V)				FOR LINE NUMBER: PAGE 12 / 22					
	CHEDULE A (FEC Form 3X)	Use separate schedule(s) (c		(check only one)					
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12					
			Detailed Summary Page	13 14 15 16 17					
۸r	y information copied from such Reports and St	atomonte may	y not be cold or used by any norse						
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
	FEDERATION OF AMERICAN HOSPI	TALCDAC							
/	FEDERATION OF AMERICAN HOSFI	IALS PAC							
	Full Name (Last, First, Middle Initial)								
A.	Craig C Armin			Date of Receipt					
	Mailing Address 23510 Berdon Street			M M / D D / Y Y Y Y					
				07 19 2007					
	City	State	Zip Code	Transaction ID: 20735055					
	Woodland Hills	CA	91367-3004	Amount of Each Receipt this Period					
	FEC ID number of contributing								
	federal political committee.	C		500.00					
	Name of Employer Tenet Healthcare Corporat-	Occupation							
	ion		rnment Programs						
	Receipt For:	Aggregate	e Year-to-Date ▼						
	Primary General		500.00	1					
	Other (specify)		300.00						
_	Full Name (Last, First, Middle Initial)			1 5					
В.				Date of Receipt					
	Mailing Address 4623 Stanford Ave.	07 19 2007							
	Cit.	Ctoto	Zin Codo						
	City	State	Zip Code	Transaction ID: 20735056					
	Dallas	<u>TX</u>	75209	Amount of Each Receipt this Period					
	FEC ID number of contributing	C		500.00					
	federal political committee.								
	Name of Employer Tenet Healthcare Corporat-	Occupation	า	7					
	Tenet Healthcare Corporation		ce President - Corporate Co	mm					
	Receipt For:		Year-to-Date ▼	7					
	Primary General			1					
	Other (specify) ▼	1	500.00						
				4					
_	Full Name (Last, First, Middle Initial)								
C.				Date of Receipt					
	Mailing Address 1256 Kensington Rd			M M / D D / Y Y Y Y Y					
	<u></u>			07 13 2007					
	City	State	Zip Code	Transaction ID: 20735060					
	McLean	VA	22101	Amount of Each Receipt this Period					
	FEC ID number of contributing	С		43.00					
	federal political committee.			10.00					
	Name of Employer	Occupation	 1	\dashv					
	FAH		ident Legislation & Public A	f					
	Receipt For:		Year-to-Date ▼	`					
	Primary General	55. 554.6	=	1					
	Other (specify) ▼		559.00						
				4					
_	UBTOTAL of Receipts This Page (optional)			1043.00					
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 / 22					
ITEMIZED RECEIPTS		or each category of the	(check only one)					
TEMIZED RECEIL TO		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and Sta	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions					
or for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
FEDERATION OF AMERICAN HOSPIT	ALS PAC							
Full Name (Last, First, Middle Initial) 4. Jeffrey E Cohen			Date of Receipt					
Mailing Address 4927 15th Street, North			07 13 7 2007					
City	State	Zip Code	Transaction ID: 20735062					
Arlington	VA	22205	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		42.00					
Name of Employer FAH	Occupation Lobbyist	1						
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General		546.00	1					
Other (specify) ▼	0 0							
Full Name (Last, First, Middle Initial) 3. Chip Kahn			Date of Receipt					
Mailing Address 4545 N Glebe Road	Mailing Address 4545 N Glebe Road							
City	07 13 2007							
City <u>Arlington</u>	State VA	Zip Code 22207	Transaction ID: 20735064 Amount of Each Receipt this Period					
FEC ID number of contributing		22201						
federal political committee.	C		41.67					
Name of Employer FAH	Occupation							
Receipt For:	President	Year-to-Date ▼	_					
Primary General	Aggregate		1					
Other (specify) ▼	0 0	541.71						
Full Name (Last, First, Middle Initial) Bonnie Moneypenny			Date of Receipt					
Mailing Address 14128 Burlingame Road	t		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$					
City	State	Zip Code	Transaction ID: 20735065					
Little Rock	AR	72211	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		35.00					
Name of Employer FAH	Occupation SVP Adm	n ninistrative Services						
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General		455.00						
Other (specify) ▼			1					
OUDTOTAL (D. 11 THE T. 11 THE T. 11 THE			118.67					
SUBTOTAL of Receipts This Page (optional)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					

PAGE 14/22 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN HOSPITALS PAC Full Name (Last, First, Middle Initial) Date of Receipt Jeffrey G. Micklos Mailing Address 3130 Tennyson St., N.W. 07 2007 13 City Zip Code State Transaction ID: 20735066 Washington DC 20015 Amount of Each Receipt this Period FEC ID number of contributing 30.00 C federal political committee. Name of Employer FAH Occupation General Counsel Aggregate Year-to-Date ▼ Receipt For: Primary General 390.00 Other (specify) Full Name (Last, First, Middle Initial) B. Richard Shallcross Date of Receipt Mailing Address 1513 Kimberleigh Court 17 2007 City State Zip Code Transaction ID: 20735068 Franklin TN 37069 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Name of Employer HCA, Inc. Occupation CFO-Western Group Receipt For: Aggregate Year-to-Date V Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) C. Mr. Michael P. Halter Date of Receipt Mailing Address 111 Righters Mill Road 2007 07 17 City State Zip Code Transaction ID: 20735142 Narberth PA 19072-1312 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer Tenet Healthcare Corporat-Occupation Chief Executive Officer ion Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2530.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 15/22	
	ITEMIZED RECEIPTS		or each category of the	(check only one)	
••	LIMIZED RECEIL 13		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1	7
Ar	ny information copied from such Reports and State	ments may	not be sold or used by any perso		<u>'</u>
or	for commercial purposes, other than using the nan	ne and add	dress of any political committee to	solicit contributions from such committee.	
Λ	NAME OF COMMITTEE (In Full)				
	FEDERATION OF AMERICAN HOSPITAL	_S PAC			
_	Full Name (Last, First, Middle Initial)			5. (5	
Α.	Mr. Leonard H. Rosenfeld Mailing Address 12213 Park Bend Drive			Date of Receipt	
	Mailing Address 12213 Park Bend Drive			07 17 2007	
	City	State	Zip Code	Transaction ID: 20735151	
	Dallas	TX	75240	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Tanat Haalthaara Carnarat	Occupation	n ty Management		
	1011		e Year-to-Date ▼		
	Primary General	1 1	500.00		
	Other (specify) 🔻	0 0	300.00		
В.	Full Name (Last, First, Middle Initial) Thomas R Rice			Date of Receipt	
	Mailing Address 266 Santa Rosa Lane			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
	City	State	Zip Code	Transaction ID: 20735153	
	Santa Barbara	CA	93108-2614	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		1000.00	
	Tenet Healthcare Corporat-	Occupation			
	ion		re Administrator		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify) ▼		1000.00		
_	Full Name (Last, First, Middle Initial)			Date of Baselet	_
C.	Ronald L. Kaufman, MD. Mailing Address 204 Annadale Road			Date of Receipt	
	Walling Address 204 Allifadale noad			07 17 2007	
	City	State	Zip Code	Transaction ID: 20735154	
	<u>Pasadena</u>	CA	91105	Amount of Each Receipt this Period	_
	FEC ID number of contributing federal political committee.	С		500.00	
1011					
			n Exectuive	_	
			e Year-to-Date ▼		
	Other (specify)		500.00		
_			0 0 0 0 0 0		
s	UBTOTAL of Receipts This Page (optional)			2000.00	
T	OTAL This Period (last page this line number only))		A.

PAGE 16/22 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page _17** 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN HOSPITALS PAC Full Name (Last, First, Middle Initial) Daniel R Waldmann Date of Receipt Mailing Address 2001 19th St., NW 07 2007 19 City State Zip Code Transaction ID: 20836352 Washington DC 20009 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Tenet Healthcare Corporat-Occupation Vice President, Government Relations ion Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Elizabeth O Johnson Date of Receipt Mailing Address 3302 Marsh Lane 07 19 2007 City Zip Code State Transaction ID: 20836353 Grapevine TX 76051 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Tenet Healthcare Corporat-Occupation VP Clinical Informatics <u>ion</u> Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. Ricky Johnston Date of Receipt Mailing Address 404 N. Church St. 2007 07 19 City Zip Code State Transaction ID: 20836358 McKinnev TX 75069 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer Tenet Healthcare Corporat-Occupation Vice President ion Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 17/22 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 17 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN HOSPITALS PAC Full Name (Last, First, Middle Initial) Date of Receipt Ms. Sabrina S. Ruderer Mailing Address 6916 Sunderland Circle 07 2007 19 City State Zip Code Transaction ID: 20836359 Nashville TN 37221 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer HCA, Inc. Occupation VP, Human Resources - Employee Berlefit Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ann G Hatcher Date of Receipt Mailing Address 410 Brook Hollow Road 19 2007 City State Zip Code Transaction ID: 20836362 **Nashville** TN 37205 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer HCA, Inc. Occupation VP Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. Jayne Chambers Date of Receipt Mailing Address 1256 Kensington Rd 2007 07 3 1 City State Zip Code Transaction ID: 21011718 McLean VA 22101 Amount of Each Receipt this Period FEC ID number of contributing C 43.00 federal political committee. Name of Employer FAH Occupation Vice President Legislation & Public Af Receipt For: Aggregate Year-to-Date ▼ Primary General 602.00 Other (specify) 1043.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 22	
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any person	on for the purpose of soliciting contributions solicit contributions from such committee.
7	NAME OF COMMITTEE (In Full)			
	FEDERATION OF AMERICAN HOSPI	TALS PAC		
A.	Full Name (Last, First, Middle Initial) Jeffrey E Cohen Mailing Address 4927 15th Street, North			Date of Receipt
				07 31 2007
	City	State	Zip Code	Transaction ID: 21011719
	Arlington	VA	22205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer FAH	Occupation	n	7
	Receipt For:		e Year-to-Date ▼	+
	Primary General	7.99.094.0		1
	Other (specify) ▼	0 0	588.00	
В.	Full Name (Last, First, Middle Initial) Chip Kahn			Date of Receipt
	Mailing Address 4545 N Glebe Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 21011720
	Arlington	VA	22207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		41.67
	Name of Employer FAH	Occupation Presiden		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		583.38	
	Full Name (Last, First, Middle Initial)			•
C.	Bonnie Moneypenny			Date of Receipt
	Mailing Address 14128 Burlingame Roa	d 		07 31 2007
	City	State	Zip Code	Transaction ID: 21011721
	Little Rock	AR	72211	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.00
	Name of Employer FAH	Occupation SVP Adn	n ninistrative Services	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		490.00	
Г				118.67
S	UBTOTAL of Receipts This Page (optional)			110.07

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

FEC ID number of contributing

federal political committee.

Other (specify)

Mailing Address 3130 Tennyson St., N.W.

General

Jeffrey G. Micklos

Washington

Name of Employer FAH

Primary

Receipt For:

City

FOR LINE NUMBER: PAGE 19/22 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 14 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. FEDERATION OF AMERICAN HOSPITALS PAC Date of Receipt 31 2007 Zip Code State Transaction ID: 21011722 DC 20015 Amount of Each Receipt this Period C 30.00 Occupation General Counsel

420.00

SUBTOTAL of Receipts This Page (optional)	•	30.00
TOTAL This Period (last page this line number only)	•	33533.34

Aggregate Year-to-Date ▼

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)		FOR LINE NUMBER: PAGE 20 / 22							
ıŦ	EMIZED RECEIPTS		or each category of the	I `—	(check only one)							
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\setminus	NAME OF COMMITTEE (In Full)											
\geq	FEDERATION OF AMERICAN HOSPIT	ALS PAC										
Α.	Full Name (Last, First, Middle Initial) Federation of American Hospitals - FEE REIMBUR	SEME		Date	e of R	eceipt						
	Mailing Address 801 Pennylvania Ave., N Suite 245	٧W		M 0	7 ·	0 2		200				
	City	State	Zip Code	Trar	sacti	on ID: 2	059379	8				
	Washington	DC	20004	Amo	ount o	f Each R	eceipt th	is Perioc				
	FEC ID number of contributing federal political committee.	C						3497.	43			
	Name of Employer	Occupation	1									
	Receipt For:	Aggregate	e Year-to-Date ▼									
	Primary General			7								
	Other (specify) ▼	0 0	5328.73	4								
В.	Full Name (Last, First, Middle Initial) Federation of American Hospitals - FEE REIMBUR	SEME		Date	e of R	eceipt						
	Mailing Address 801 Pennylvania Ave., N Suite 245	٧W		м 0	7 ·	1 9		2 0 0				
	City	State	Zip Code	Tran	sacti	on ID: 2	083635	5				
	Washington	DC	20004	Amo	ount o	f Each R	eceipt th	is Perioc	l			
	FEC ID number of contributing federal political committee.	С						2213.	46			
	Name of Employer	Occupation	1									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		7540.43	7								
	Other (specify) ▼		7542.19	1								

SUBTOTAL of Receipts This Page (optional)	<u> </u>	5710.89
TOTAL This Period (last page this line number only)	>	5710.89

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5(CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER: PAGE 21/22									
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	y Information copied from such Reports and Sta for commercial purposes, other than using the r												
\rangle	NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN HOSPIT	ALS PAC											
۹.	Full Name (Last, First, Middle Initial) Bennett Election Committee Inc			Transaction ID: 20726244 Date of Disbursement									
	Mailing Address 175 South West Tem	le Suite 650		$\begin{array}{c c} \begin{array}{c c} M & 7 & \\ \hline \end{array} \begin{array}{c c} D & 1 & D \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y \\ \hline \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y \\ \end{array} \begin{array}{c c} Y & Y & Y & Y & Y & Y \\ \end{array} \begin{array}{c$									
	City Salt Lake City	State Zip Code UT 84101		Amount of Each Disbursement this Period									
	Purpose of Disbursement		011	1500.00									
	Candidate Name Sen. Robert Bennett		Category/ Type										
	Office Sought: House Disbute X Senate President	x Primary General Other (specify)											
	State: UT District: 2												

SUBTOTAL of Disbursements This Page (optional)	•	1500.00
TOTAL This Period (last page this line number only)	<u> </u>	1500.00

Transaction ID: 20652763 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciding contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN HOSPITALS PAC Full Name (Last, First, Middle Initial) A. Wachovia Bank Mailing Address 801 Pennsylvania Ave, NW City Washington DC 20004 Purpose of Disbursement Bank Fees Candidate Name Other (specify) Transaction ID: 20652763 Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID: 20652763 Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID: 20901578 Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID: 20901578 Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID: 20901578 Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID: 20901578 Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID: 20901578 Date of Disbursement this Period Transaction ID: 20901578 Date of Disbursement this Period Transaction ID: 20901578 Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID: 20901578 Date of Disbursement this Period Transaction ID: 20859778	S	CHEDULE B (FEC Form 3X)					LINE NUMBER: PAGE 22/22													
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B. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address 801 Pennsylvania Ave, NW City Washington Purpose of Disbursement Bank Fees Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) Transaction ID: 20901578 Date of Disbursement this Period Amount of Each Disbursement this Period 1.00 Bank Fees Bank Fees Bank Fees Full Name (Last, First, Middle Initial) Transaction ID: 20859778 Date of Disbursement this Period Type Other (specify) Type Transaction ID: 20859778 Date of Disbursement Other (specify) Transaction ID: 20859778 Date of Disbursement ID: 20859778 Date of Disbursement Other (specify) Transaction I		Senate President	Primary						Bank	Fee	es									
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